



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

INFORMATIONAL LETTER NO.1657-MC

DATE: April 4, 2016

TO: All Iowa Medicaid Providers and Managed Care Organizations (MCOs)
Excluding Individual Consumer Directed Attendant Care (CDAC)

FROM: Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

RE: Billing for Medicaid Services -Updated

EFFECTIVE: Immediately

*******This letter replaces Informational Letter No. 1641-MC dated April 1, 2016*******

DHS has transitioned most Medicaid members to a new managed care program, called IA Health Link, on April 1, 2016.

Effective April 1, 2016, all claims for services provided on or after April 1, 2016, for MCO-enrolled members must be submitted directly to the appropriate MCO, adhering to MCO's claims submission and timeliness guidelines. The IME has directed that the MCO provider agreements require providers to submit claims within 180 days of the date of service if third party liability is not involved.

Billing for Services Provided in March 2016 and April 2016:

- Hospitals
 - In most cases, acute inpatient admissions for hospital services prior to April 1, 2016, with a discharge after April 1, 2016, will be the responsibility of the IME up to 60 days. MCOs are responsible for admission dates on or after April 1, 2016. Acute inpatient admissions for hospital services occurring on or before March 31, 2016, that exceed 60 days will be split billed with the initial span submitted to the IME and the remaining days submitted to the applicable MCO. Please refer to Informational Letter [1652](#)¹ for additional details.
- Obstetrical (OB) care
 - Delivery services that occur on or after April 1, 2016, will be billed as a global rate to the MCOs.
- Medical Supplies and Equipment
 - Items typically billed as a 30 day rental period with a last date of service that extends past March 31, 2016, should be billed to the IME with a last date of service of March 31, 2016, with the "KR" modifier. The claim will be priced at a prorated amount that reflects the usage of less than one month. The MCOs are

¹ https://dhs.iowa.gov/sites/default/files/1652-MCBillingforHospitalServices_0.pdf

responsible for the remaining rental period for dates of service on or after April 1, 2016.

- Providers must maintain accurate documentation and MCOs should not be billed for a timeframe that exceeds the IME rental policy.

Claim Forms by MCO:

Below is a chart that outlines the claim forms required by each MCO broken down by service type and payment timeframes. Please contact the member's MCO for the Waiver claim form.

Claim Form	Amerigroup Iowa, Inc.	AmeriHealth Caritas Iowa, Inc.	UnitedHealthcare Plan of the River Valley, Inc.
Institutional Form	Standard *UB-04	Standard *UB-04	Standard *UB-04
Professional Form	Standard CMS 1500	Standard CMS 1500	Standard CMS 1500
Waiver Form	Iowa Claim for Targeted Medical Care 470-2486 or the universal CMS 1500	AmeriHealth Claim for Targeted Medical Care or the universal CMS 1500	Iowa Claim for Targeted Medical Care 470-2486 or the universal CMS 1500
Timeframe for payment	Every business day	3 times per week (M/W/F)	Every business day

*UB-04 may also be known as the CMS-1450

MCO Contact Information

AmeriHealth Caritas Iowa, Inc. <ul style="list-style-type: none">• For questions call Provider Services at 1-844-411-0579 Amerigroup Iowa, Inc. <ul style="list-style-type: none">• For questions call Provider Services at 1-800-454-3730 UnitedHealthcare Plan of the River Valley, Inc. <ul style="list-style-type: none">• For questions call Provider Services at 888-650-3462
--

If you have any questions please contact the member's MCO at the telephone number listed above.